

# SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Actual Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

## ACCIDENT STATEMENT

Date of Submission .....	19/06/2023 17:35 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	18/06/2023 18:50 (SGT)
Exact Location of Accident .....	Sin Ming Rd, Singapore
Additional Location Information .....	Towards Upper Thomson Road
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SHD3840G
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### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	COMFORT TRANSPORTATION PTE LTD
Company Reg No .....	199303821R
Email Address .....	fleetsafety@cdgtaxi.com.sg
Mobile Phone No .....	(Phone) +65-91182801
Alternative Phone No .....	(Office) +65-65508768

### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Prius
Variant .....	-
Exact purpose for which vehicle was being used at time of accident .....	Private hire
Are you claiming under your own insurance policy for repair to your vehicle? .....	No - Reporting only
Vehicle Category .....	Taxi
Transmission .....	Auto
CC .....	1798

### INSURANCE COMPANY

Name of Insurance Company .....	HSBC Life (Singapore) Pte. Ltd
Policy Number / Cover Note Number .....	VFX/P2419138

### DRIVER

Name of Driver .....	DOMINIC CHEW ENG KUANG
NRIC No .....	S0171499F
Date Of Birth .....	27/11/1951
Occupation .....	Outdoor

Date Of Driving Pass .....	21/06/1972
Driving experience .....	51 YEARS
Gender .....	Male
Mobile Number .....	(Phone) +65-91182801
Alt. Phone Number .....	-
Email Address .....	fleetsafety@cdgtaxi.com.sg
Address .....	BLK 221B BEDOK CENTRAL # 10-84
Address complement .....	-
Postcode .....	462221
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	RELIEF DRIVER
Does Driver Own Other Vehicles? .....	No
Vehicle Registration Number of Other Vehicle Owned by Driver .....	-
Insurance Company of Other Vehicle Owned by Driver .....	-

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident .....	Collision - Head to Rear
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	2
Was anybody injured in the Accident? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	Yes
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No
Translator's name .....	-
Translator's ID .....	-
Translator's phone number .....	-
Translator's email .....	-
Original language used in the statement .....	-

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Bedok North Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18002449999
Alt. Police Station Phone No .....	(Fax) +65-62447258
Police Station Address .....	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20230618/2071

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Reasons for not uploading a video of the accident .....	FILE IS NOT SUITABLE

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	FBK695M
Vehicle Manufacturer .....	Yamaha
Vehicle Model .....	JUPITER MX (HC)

Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Motorcycle
Name of Driver .....	UNKNOWN
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person .....	UNKNOWN
Gender .....	Male
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	Injured
Injured person in which vehicle? .....	FBK695M
Were seat belts worn? .....	-
Was this injured conveyed to hospital by ambulance? .....	Yes

**SKETCH PLAN****IMPORTANT NOTICE**

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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:

- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims.
- (ii) investigating the accident and/or my claims.
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me.
- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(Collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be based outside of Singapore, for one or more of the above Purposes.



**FLASH ACCIDENT  
REPORTING OFFICER**

FRO KHAMARAJ



Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

**Sketch Plan**

**18/06/2023 - 22:00HRS**



A - SHD3840G  
B - FBK695M

Describe Circumstances of the Accident

PLEASE REFER TO POLICE REPORT T/20230618/2071

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &  
Time

Driver's Signature (If driver is not the policyholder) / Date  
& Time

18/06/2023 - 22:00HRS

FLASH ACCIDENT  
REPORTING OFFICER

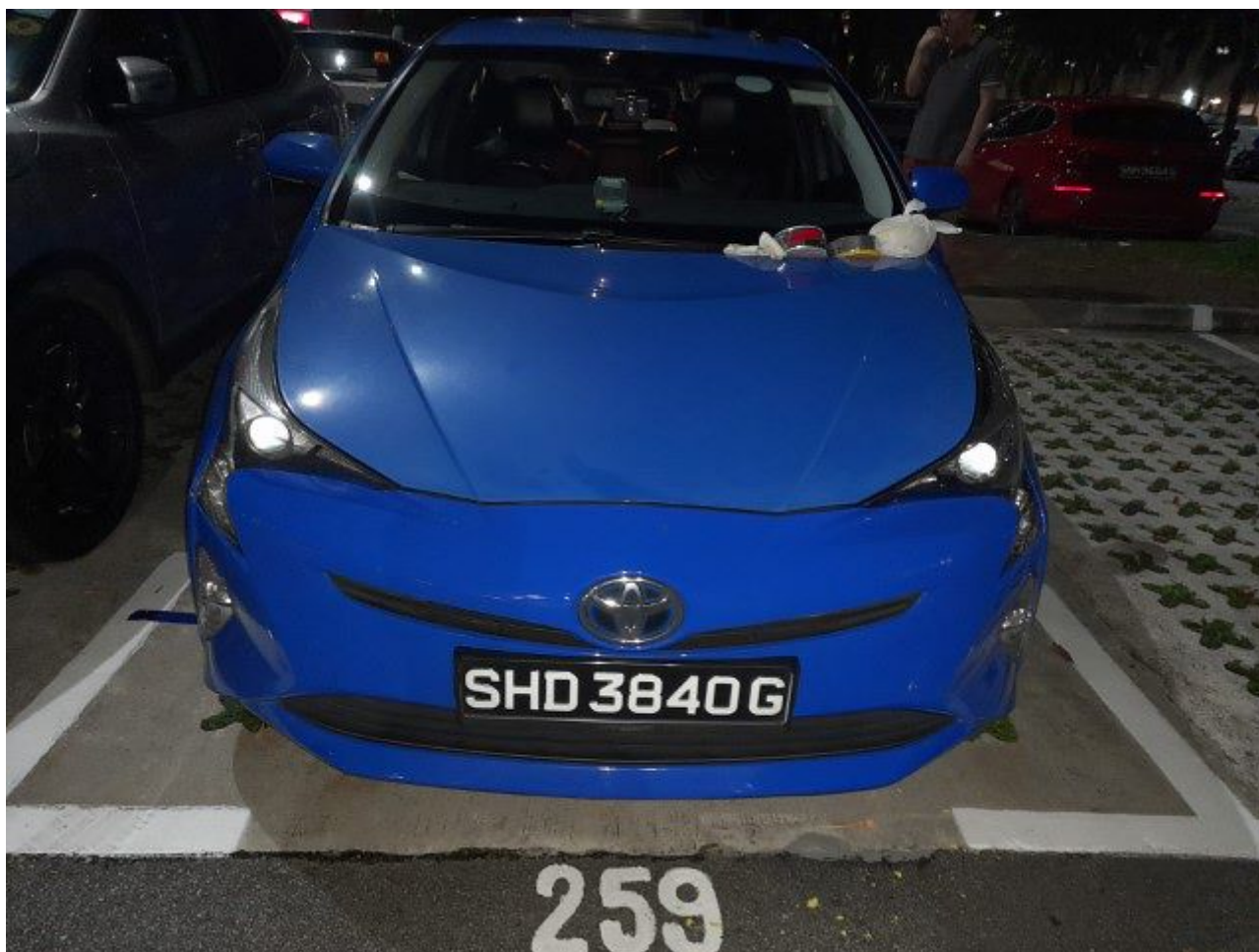
FRO KHAMARAJ

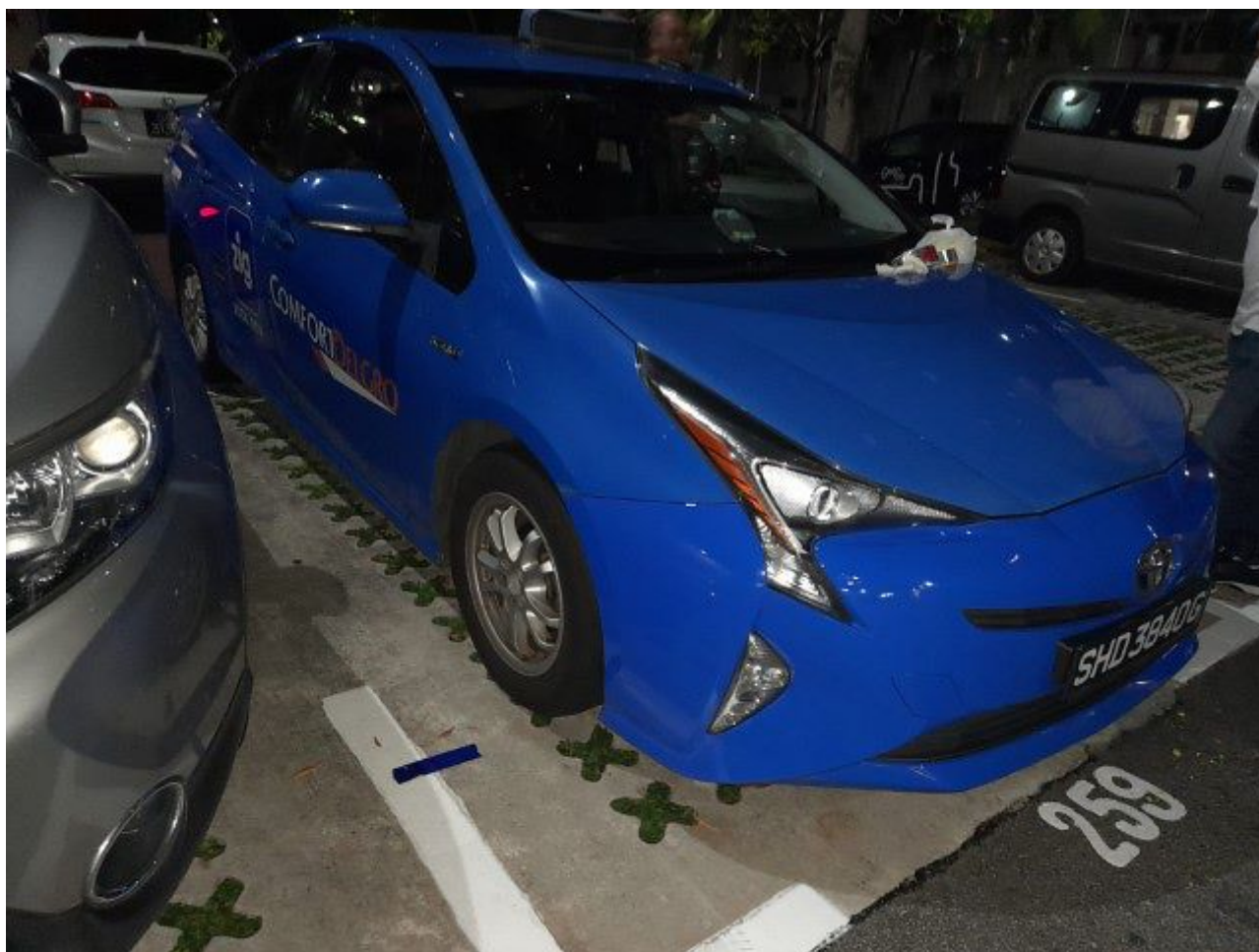


Witnessed by Reporting Centre  
Personnel









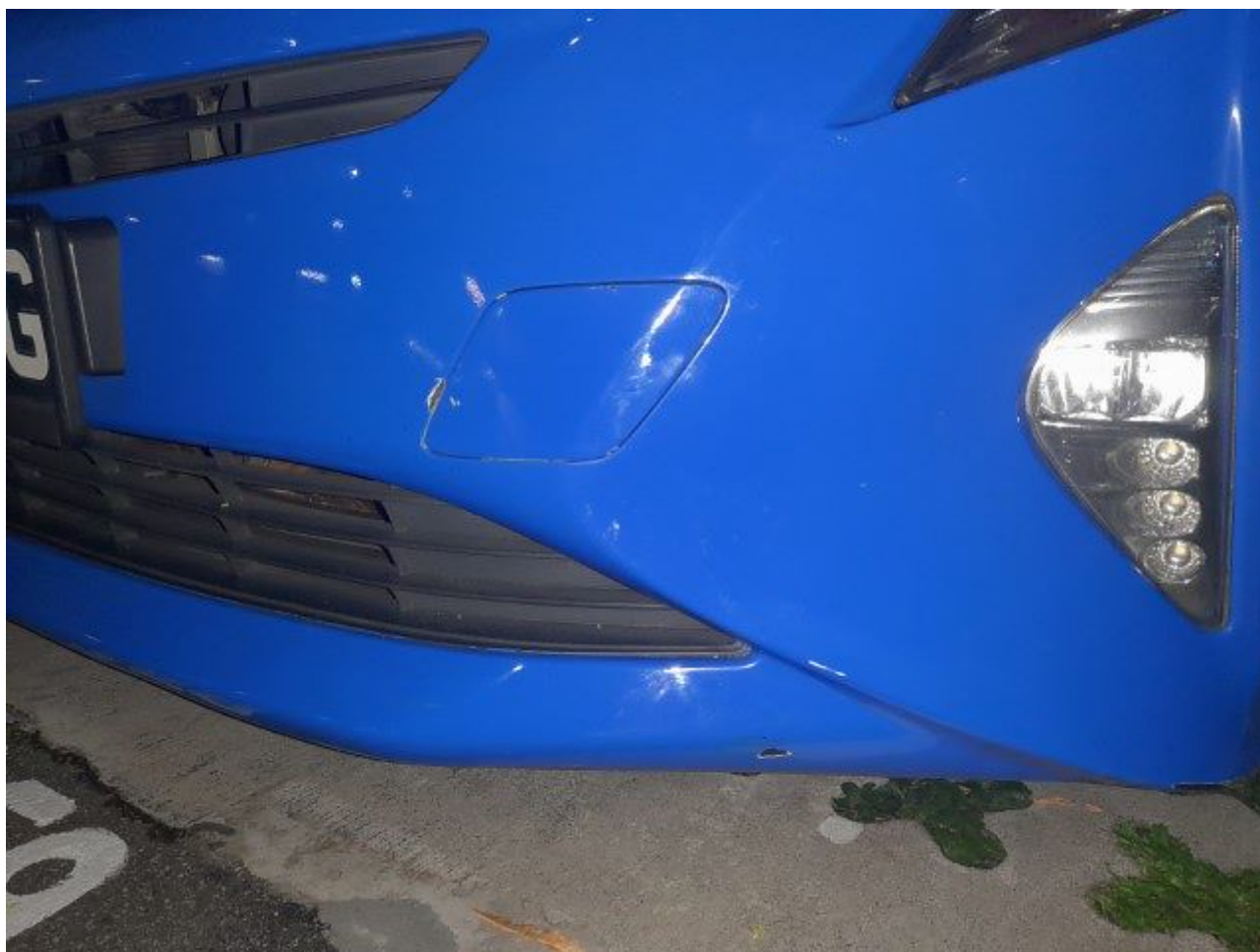






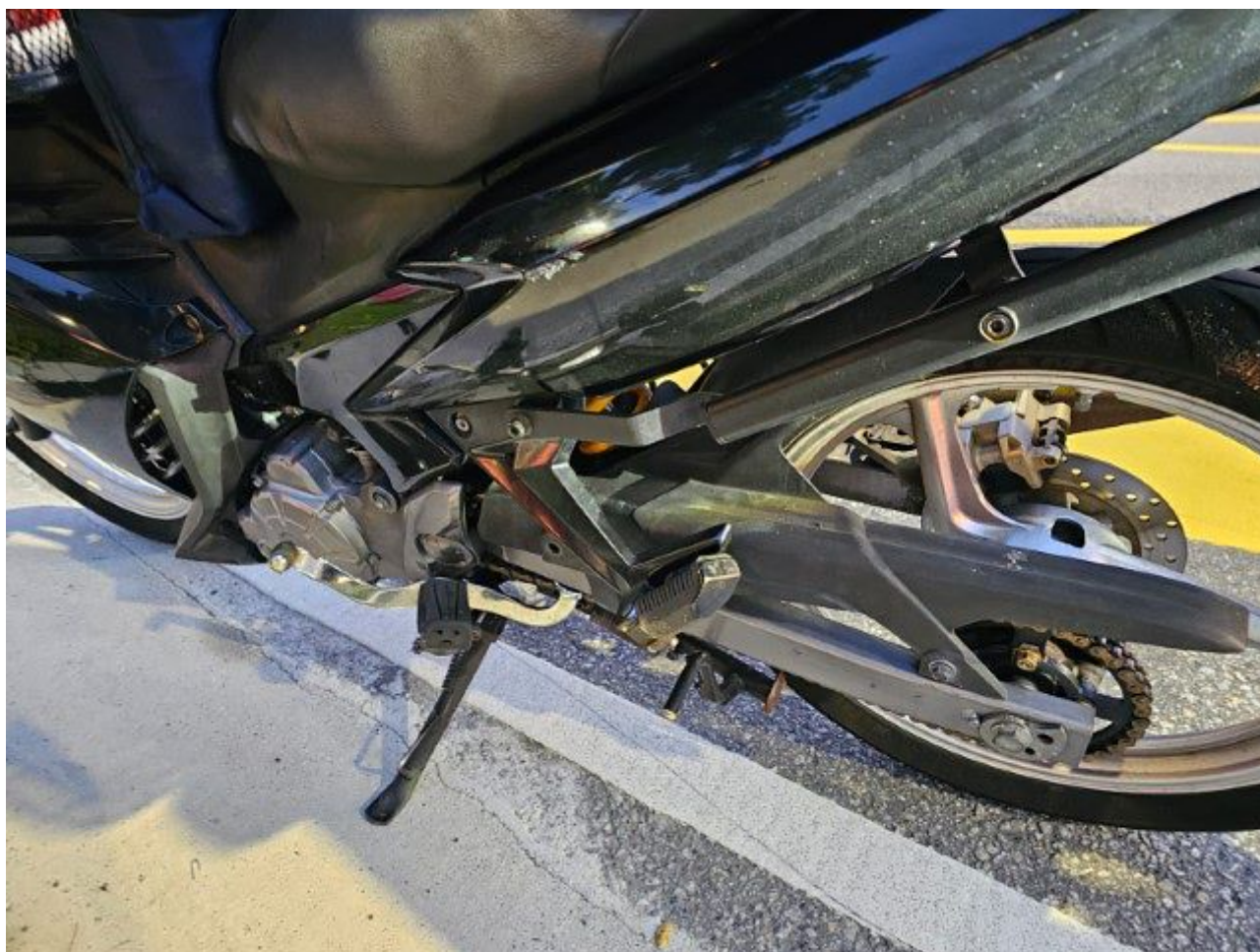


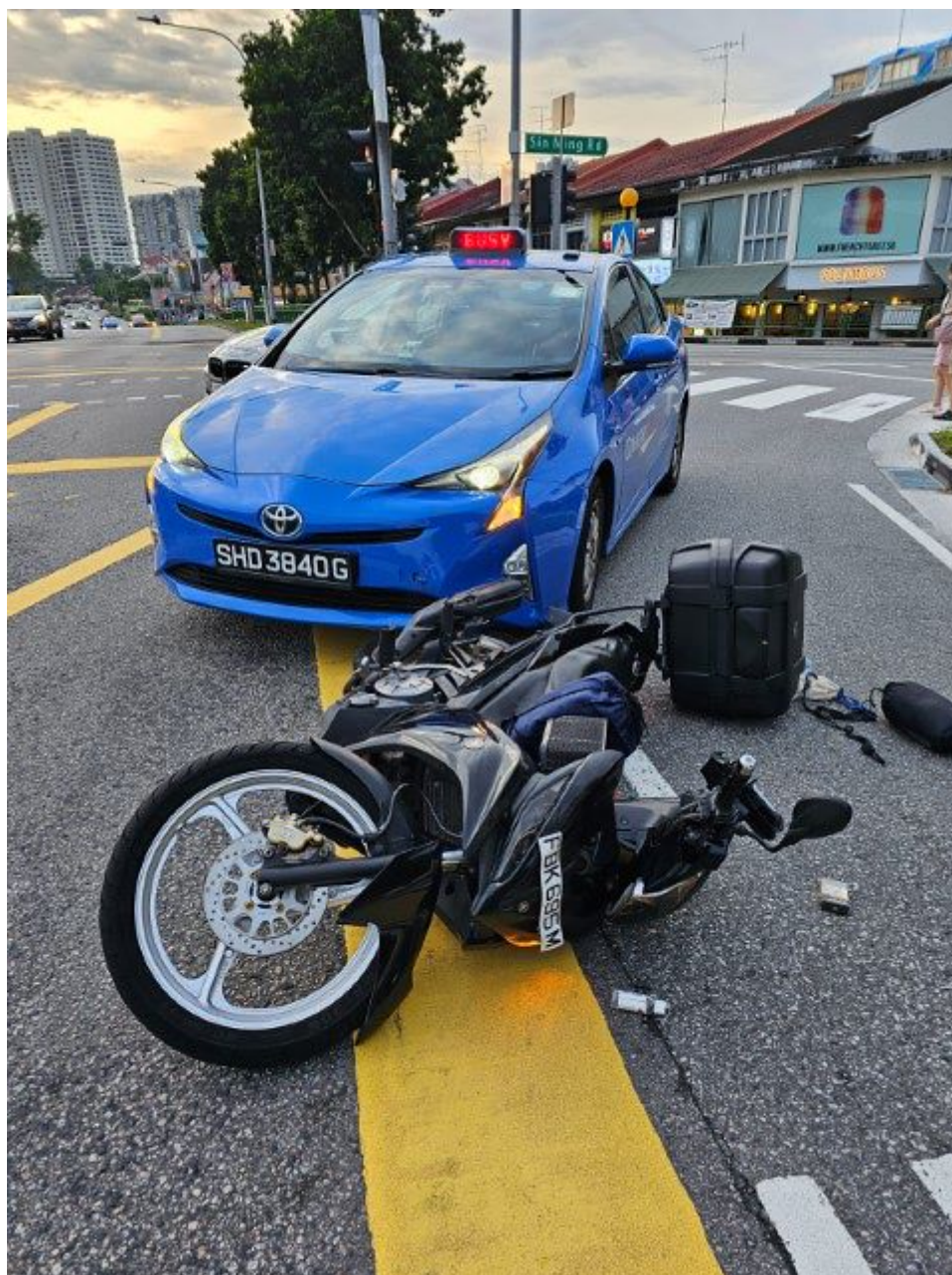


















**SINGAPORE  
POLICE FORCE**



T/20230618/2071

1 of 3

Police Station Of Origin:  
Bedok N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

Report No. T/20230618/2071

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 18/06/2023 21:00	Vide Report No.: E/20230618/0138	Station Diary No.: 84
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**Informant's Particulars**

Name of Informant: DOMINIC CHEW ENG KUANG			Address: APT BLK 221B BEDOK CENTRAL #10-84 SINGAPORE 462221		
ID Type / ID No.: NRIC NO / S0171499F			Contact No.: Home/Office: Mobile: 91182801		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 71	Date of Birth: 27/11/1951	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Taxi driver			Driving Licence Information: Class: 3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 18/06/2023 18:50	Type of Location: T-Junction
Location:  UPPER THOMSON ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBK695M	Motorcycle				Slightly Damaged	0
SHD3840G	Car				Slightly Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20230618/2071

2 of 3

Police Station Of Origin:

Bedok N.P.C

30 Bedok North Road SINGAPORE 469676

Tel No. 1800-2449999

Report No. T/20230618/2071

**CONTINUATION OF REPORT****Brief Details.**

On 18/06/2023 at about 1850hrs, I was driving my taxi, SHD3840G alone and was driving along Sin Ming Road entering into the slip road going towards Upper Thomson Road, I noticed there were two motorcycles overtaking my taxi from the left side and was in front of my vehicle. I stopped at the slip road as I made a right hand turn to check on vehicle coming from the right side, after ensuring there is no car coming from the Upper Thomson Road direction, I drove my vehicle forward but suddenly realized that the motorcycle was still in front of my vehicle and thus the front portion of my vehicle hit onto the rear side of the motorcycle, causing the male Malay rider to fall onto the ground. Immediately I went down to make a check on him and he was conscious and I asked if he required medical attention, initially he replied no need but later when his friend joined in, he decided that he should thus I called for ambulance service. Traffic police also came down to scene and I was provided E/20230618/0138 by the officer, he had taken my in-car camera SD card and the rider was also conveyed by the ambulance, I was not injured during the process. The rider and myself did not manage to exchange our particulars as he was conveyed by ambulance, I was told to lodge a traffic police report by the officer.



**SINGAPORE  
POLICE FORCE**

T/20230618/2071

Police Station Of Origin:  
Bedok N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

3 of 3

Report No. T/20230618/2071

CONTINUATION OF REPORT

Signature of Officer Recording The Report:

G /  
SI CHOO CHUN NAM

Signature Of Informant:

Signature Of Interpreter:  
Not applicableDate/Time:  
18/06/2023 21:00

Officer In Charge Of Case:  
TP / GIT /  
SI MOHAMED SOPHIAN BIN MOHAMED AMIR  
Contact No.: 91874317

Classification Of Case:

NP168

